RESI AVAILABLE COLI						- 10 10 10 10 10 10 10 10 10 10 10 10 10							
							Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOI Effective December 29, 1999								09511737					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							ALL PE	ENTITY	OR	OTHER SMALL 6			
			R FILED NUMBER EXTRA			RA	_	FEE	Ü	RATE	FEE		
ВА	SIC FEE							345.00	OR		690.00		
TOTAL CLAIMS		41	40 minus 20= ·			X\$	9=		OR	X\$18=	BIN		
INE	EPENDENT CL	AIMS C	5 minus 3 = : A			ХЗ	9=		OR	X78=	167		
MULTIPLE DEPENDENT CLAIM PRESENT									OR	+260=	150		
* If the difference in column 1 is less than zero, enter "0" in column 2									OR	TOTAL	1706		
CLAIMS AS AMENDED - PART II OR TOTAL OTHER THAN										THAN			
(Column 1) (Column 2) (Column 3)						SM	ALL	ENTITY	OR	SMALL E			
ΑF		CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	- 4	Minus	PAID FOR	= / ·	X\$	9=	FEE	OR	X\$18=	18		
Z	Independent	• .5	Minus	5	-	ХЗ	0			X78=	, ,		
₹	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDENT CLAIM					ÒR	A76=	•		
				•		+13	10 =		OR	+260=			
						ADOIT	OTAL FEE		OR	TÖTAL ADDIT. FEE	18		
		(Column 1) (Column 2) (Column 3)											
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
AMENDME	Total	. 22	Minus	4	= ()~	X\$	9=		OR	X\$18=			
AME	Independent	• 5	Minus	 5	='/	хз	9=		OR	X78=			
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT CLAIM		+13	10=		OR	+260=			
							OTAL		OR	TOTAL	1		
		(O al 4)		(Caluma O)	(Column 2)	ADDIT	. FEE		,	ADDIT. FEE			
-	P.D. ZEVEZ	(Column 1) CLAIMS	16 15 15 7	(Column 2) HIGHEST	(Column 3)) _		ADDI-	1		ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL		
NON	Total	•	Minus	••	=	xs	9= -		OR	X\$18=			
AME	Independent	•	Minus	***	=	ХЗ	9=		OR	X78=			
 	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT CLAIM	<u> </u>	+13	30=		OR	+260=			
* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.									ł	TOTAL			
"If the entry in column 1 is less than the entry in column 2, write "Un column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													
	The "Highest Nur	nber Previously Pa	uid For (Total o	r Independent) is th	e highest numb	er tound in	gae et	opropriate bo	x in c	oiumn 1.			

FORM PTO-675 (Rev. 12/89)

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